

McLean County Dept. of Parks & Recreation Participant Agreement

PROGRAM:**Off Road Bike Race****FEE:****\$25.00/Person****AGES:****All ages****DATE:****September 18, 2005****LOCATION****Evergreen Lake/COMLARA Park**

Most McLean County Parks experiences take place outdoors, in conditions often quite different from the controlled environments and predictability of buildings and cities. Nature and weather occur on their own schedule, sometimes unexpectedly, often beyond the control of people to change them.

The undersigned, a participant in the Off Road Bike Race, offered by the McLean County Parks and Recreation Department agrees as follows:

1. I acknowledge that activities at the Off Road Bike Race may require strenuous physical activity and endurance.
2. Terrain conditions, weather, and other people affect the overall activity experience. I am aware of the factors that follow:
 - The activities may take place on terrain that is groomed or ungroomed. The terrain varies greatly and may be icy, wet, or rough, depending on weather and other participants.
 - Winds, temperature, and occasional storms can affect the tournament experience. I realize that I should take precautions and guard for weather-related conditions.
 - The activities may take place on or near Evergreen Lake, a body of water, which presents natural risks commonly associated with aquatic activities.
3. I certify that, to the best of my knowledge, I have no physical, mental, or emotional condition which might be aggravated by this activity, or which might in any way endanger staff or other participants.
4. I have informed the McLean County Parks & Recreation Department of any physical, mental, or emotional condition which might affect my ability to participate in and withstand all possible Off Road Bike activities.
5. I will obey all rules, regulations, and directives of the McLean County Parks & Recreation Department and of the person in charge, and will assist by informing and/or calling to the attention of the person in charge any situation which might result in injury.

Thus acknowledging the rigors of all activities connected with the Off Road Bike Race and the unpredictability and power of natural and weather events, and in consideration for being accepted as a participant in this program, I hereby accept all responsibility for myself and for any injuries to myself while participating in the above designated program. I agree, therefore, that the County of McLean and the McLean County Parks & Recreation Department, their agents, and employees, will not be liable for any damages or injuries directly, or approximately caused by any act, happening, or event.

Please recognize that the McLean County Park and Recreation Department does not carry medical accident insurance for injuries sustained in its programs. Therefore, each person registering themselves or a family member for a recreation program/activity should review their own health insurance policy for coverage. It must be noted that the absence of health insurance coverage does not make the McLean County Department of Parks & Recreation responsible for the payment of medical expenses.

Your participation in this activity requires the execution of the following Waiver and Release. Your cooperation is greatly appreciated.

I (we) parent(s) of [or legal guardian(s)] for _____ hereby consent to her/him participating in above designated program and have signed the above participant agreement on behalf of said minor.

Name of Participant _____

Address _____ **City** _____ **State** _____ **Zip** _____

Home Phone _____ **Date** _____

Signature of Participant _____

Signature of Parent/Guardian _____

(IF PARTICIPANT IS 17 YRS. OLD OR YOUNGER)

Print Parent/Guardian Name _____

DATE OF BIRTH ____/____/____ **Allergies or Current Medications** _____

E-Mail Address _____

CHECK ONE : NOVICE RACE(10AM) ____ **SPORT RACE(Noon)** ____ **EXPERT RACE(Noon)** ____

